

POSITION	ID NO.	DATE
CLASSIFIER	25	01-22-96
EXAMINER	540	2/7/96
TYPIST	740	6-8-96
VERIFIER	40	7/11
CORPS CORR.		
SPEC. HAND	284	6/4
FILE MAINT.		
DRAFTING		

BEST AVAILABLE COPY

INDEX OF CLAIMS

Claim	Date
Final Original	
1 23	
2 24	
13 25	
14 26	
3 27	
4 28	
5 31	
6 32	
7 34	
8 35	
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29 49	
30 50	

Claim	Date
Final Original	
31 51	
26 52	
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50 99	
51 100	

SYMBOLS

- ✓ Rejected
- = Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected

FINAL	ORIGINAL
52 101	
53 102	
54 103	
55 104	
56 105	